Official Form 1 (1/08)								
	United States ASTERN DISTRIC					Voluntary	Petition	
Name of Debtor (if individual, enter Last, First, M.	iddle):		Name of Joint De	btor (Spou	se)(Last, First, Middle	):		
DOW, PATRICK STEVEN			DOW, NICOL	MARIE				
All Other Names used by the Debtor in the la (include married, maiden, and trade names):	st 8 years		All Other Names (include married, ma			e last 8 years		
NONE			aka Nicol Ma					
Last four digits of Soc. Sec. or Indvidual-Taxpayer I	.D. (ITIN) No./Complete	EIN	_			D. (ITIN) No./Complet	e EIN	
(if more than one, state all): 0540  Street Address of Debtor (No. & Street, City	and State):		(if more than one, state Street Address of			, City, and State):		
4 Southview Dr.	,		4 Southview		(	,, ,		
Oroville CA		ZIPCODE <b>95966</b>	Oroville CA				ZIPCODE <b>95966</b>	
County of Residence or of the Principal Place of Business: Butte		+	County of Resider Principal Place of		Butte			
Mailing Address of Debtor (if different from s	treet address):		Mailing Address			from street address):		
SAME			SAME					
		ZIPCODE	1				ZIPCODE	
Location of Principal Assets of Business Deb (if different from street address above): NOT API	tor PLICABLE	+	!				ZIPCODE	
,	Nature of	Business	1 .	Chanton of	Rankguntes Co.	de Under Which		
Type of Debtor (Form of organization)	(Check one bo			the Petition		theck one box)		
(Check one box.)  ✓ Individual (includes Joint Debtors)	Health Care Busin	ess	Chapter 7		☐ Cha	apter 15 Petition for	Recognition	
See Exhibit D on page 2 of this form.	Single Asset Real		Chapter 9		of	a Foreign Main Pro	ceeding	
Corporation (includes LLC and LLP)	in 11 U.S.C. § 101	(51B)	☐ Chapter 11 ☐ Chapter 12			apter 15 Petition for		
Partnership	Railroad Stockbroker		Chapter 13		of a	a Foreign Nonmain	Proceeding	
Other (if debtor is not one of the above entities, check this box and state type of	Commodity Broke	r		Nature of	,	k one box)		
entity below	Clearing Bank				umer debts, defin "incurred by an		are primarily ess debts.	
	Other		individual pr	rimarily for a	personal, family			
	Tax-Exem	pt Entity	or household					
	(Check box, it		Charles and beau	Chap	ter 11 Debtors:			
	Debtor is a tax-exe		Check one box:  Debtor is a sma	II husiness as	s defined in 11 H	S.C. 8 101(51D)		
	under Title 26 of the Code (the Internal					ed in 11 U.S.C. § 1	01(51D).	
Etter - F (Charle	-		Check if:					
Filing Fee (Check   ☐ Full Filing Fee attached	one box)			zate nonconti	ngent liquidated	debts (excluding del	ots owed	
Filing Fee to be paid in installments (applicable	to individuals only). Mus	t attach			ess than \$2,190,0			
signed application for the court's consideration c to pay fee except in installments. Rule 1006(b).		s unable	Check all applica					
_			A plan is being		nis petition			
Filing Fee waiver requested (applicable to chapt signed application for the court's consideration. S	• .	ıst attach			-	etition from one or n	nore	
			classes of cred	itors, in acco	rdance with 11 U	J.S.C. § 1126(b).		
Statistical/Administrative Information						THIS SPACE IS FOR	COURT USE ONLY	
Debtor estimates that funds will be available for								
Debtor estimates that, after any exempt propert distribution to unsecured creditors.	y is excluded and admini	strative expenses paid	d, there will be no funds	s available for				
Estimated Number of Creditors								
1-49 50-99 100-199 200-9	99 1,000-	5,001- 10,001		50,001- 100,000	Over			
Estimated Assets	5,000	10,000 25,000		100,000	100,000	200	0_26550	
\$0 to \$50,001 to \$100,001 to \$500,		\$10,000,001 \$50,00		\$500,000,001	More than		9-36559	
\$50,000 \$100,000 \$500,000 to \$1 millio		to \$50 to \$10 million million		to \$1 billion	\$1 billion		FILED t 05, 200	9
Estimated Liabilities			П	П	П	_	:33 PM	_
\$0 to \$50,001 to \$100,001 to \$500,00 \$50,000 to \$1		\$10,000,001 \$50,00 to \$50 to \$10		\$500,000,001 to \$1 billion	More than \$1 billion	RELIE	F ORDEREI	
\$300,000 \$100,000 to \$1 millio		million million		w or onlion	ψι canon		. BANKRUPTCY CO	
							002005306	

Official Form 1 (1/08) FORM B1, Page Name of Debtor(s): **Voluntary Petition** PATRICK STEVEN DOW and (This page must be completed and filed in every case) NICOL MARIE DOW All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Location Where Filed: Case Number: Date Filed: NONE Location Where Filed: Date Filed: Case Number: (If more than one, attach additional sheet) Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor Name of Debtor: Case Number: Date Filed: NONE District: Relationship: Judge: Exhibit A Exhibit B (To be completed if debtor is required to file periodic reports (To be completed if debtor is an individual (e.g., forms 10K and 10Q) with the Securities and Exchange whose debts are primarily consumer debts) Commission pursuant to Section 13 or 15(d) of the Securities I, the attorney for the petitioner named in the foregoing petition, declare that I Exchange Act of 1934 and is requesting relief under Chapter 11) have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I have delivered to the debtor the notice required by 11 U.S.C. §342(b). Exhibit A is attached and made a part of this petition 8/5/2009 /s/ ERIC R. ORTNER Signature of Attorney for Debtor(s) Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and exhibit C is attached and made a part of this petition.  $\boxtimes$ No Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made part of this petition. If this is a joint petition: Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes.) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the

entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and

Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day

Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(1)).

period after the filing of the petition.

Official Form 1 (1/08) FORM B1, Page 3 Name of Debtor(s): **Voluntary Petition** PATRICK STEVEN DOW and (This page must be completed and filed in every case) NICOL MARIE DOW Signatures Signature(s) of Debtor(s) (Individual/Joint) Signature of a Foreign Representative I declare under penalty of perjury that the information provided in this I declare under penalty of perjury that the information provided in this petition is true and correct. [If petitioner is an individual whose debts are primarily consumer debts petition is true and correct, that I am the foreign representative of a debtor and has chosen to file under chapter 7] I am aware that I may proceed in a foreign proceeding, and that I am authorized to file this petition. under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to (Check only one box.) proceed under chapter 7. I request relief in accordance with chapter 15 of title 11, United States [If no attorney represents me and no bankruptcy petition preparer Code. Certified copies of the documents required by 11 U.S.C. § 1515 are signs the petition] I have obtained and read the notice required by attached. 11 U.S.C. §342(b) Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the I request relief in accordance with the chapter of title 11, United States chapter of title 11 specified in this petition. A certified copy of the order Code, specified in this petition. granting recognition of the foreign main proceeding is attached. X /s/ PATRICK STEVEN DOW Χ Signature of Debtor (Signature of Foreign Representative) X /s/ NICOL MARIE DOW Signature of Joint Debtor (Printed name of Foreign Representative) Telephone Number (if not represented by attorney) 8/5/2009 (Date) 8/5/2009 Signature of Attorney\* Signature of Non-Attorney Bankruptcy Petition Preparer X /s/ ERIC R. ORTNER I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for Signature of Attorney for Debtor(s) compensation and have provided the debtor with a copy of this document ERIC R. ORTNER 098183 and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by Printed Name of Attorney for Debtor(s) ERIC R. ORTNER bankruptcy petition preparers, I have given the debtor notice of the Firm Name maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached. 2053 Forest Avenue, Suite 7 Chico CA 95928 Printed Name and title, if any, of Bankruptcy Petition Preparer 530-891-6128 Telephone Number Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social-Security number of the officer, principal, *8/5/2009* responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C.  $\S$  110.) \*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect Address Signature of Debtor (Corporation/Partnership) I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor. Date Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social-Security number is provided above. The debtor requests the relief in accordance with the chapter of title

11, United States Code, specified in this petition.

Signature of Authorized Individual Printed Name of Authorized Individual Title of Authorized Individual 8/5/2009

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual.

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

# UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF CALIFORNIA SACRAMENTO DIVISION

In re	PATRICK STEVEN DOW	Case No.	
	and	Chapter :	7
	NICOL MARIE DOW		
	Debtor(s)	-	

## EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

WARNING: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

Exhibit B. Greek the of the five statements below and attach any accuments as an extent.
1. Within the 180 days <b>before the filing of my bankruptcy case</b> , I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.
2. Within the 180 days <b>before the filing of my bankruptcy case</b> , I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not I have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.
3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now.  [Summarize exigent circumstances here.]

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

B 1D (Official Form 1, Exhibit D) (12/08)

4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement]
ust be accompanied by a motion for determination by the court.]
Incapacity. (Defined in 11 U.S.C. § 109 (h)(4) as impaired by reason of mental illness or mental deficiency
so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);
Disability. (Defined in 11 U.S.C. § 109 (h)(4) as physically impaired to the extent of being unable, after
reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);
Active military duty in a military combat zone.
5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.
I certify under penalty of perjury that the information provided above is true and correct.
Signature of Debtor: /s/ PATRICK STEVEN DOW
Date: <u>8/5/2009</u>

Certificate Number: <u>02910-CAE-CC-007920134</u>

### **CERTIFICATE OF COUNSELING**

. 2.25

1 CERTIFY that on August 5, 2009	, at	3:33	O'Clock PM ED1,				
Patrick Dow		received	from				
InCharge Education Foundation, Inc.							
an agency approved pursuant to 11 U.S.C. §	3 111 to	provide credit c	ounseling in the				
Eastern District of California	, ar	n individual [or	group] briefing that complied				
with the provisions of 11 U.S.C. §§ 109(h) and 111.							
A debt repayment plan was not prepared	If a d	ebt repayment p	plan was prepared, a copy of				
the debt repayment plan is attached to this c	ertificat	e.					
This counseling session was conducted by i	nternet a	nd telephone	·				
Date: August 5, 2009	By	/s/Deborah Will	liams				
	Name	Deborah William	ms				
	Title	Certified Bankr	uptcy Counselor				

<sup>\*</sup> Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. §§ 109(h) and 521(b).

#### B22A (Official Form 22A) (Chapter 7) (12/08)

In re PATRICK STEVEN DOW and NICOL MARIE DOW	According to the information required to be entered on this statement (check one box as directed in Part I, III, or VI of this statement):
Debtor(s)	☐ The presumption arises.
Case Number:	☐ The presumption is temporarily inapplicable.
(If known)	(Check the box as directed in Parts I, III, and VI of this statement.)

## CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME AND MEANS-TEST CALCULATION

In addition to Schedules I and J, this statement must be completed by every individual chapter 7 debtor, whether or not filing jointly. Unless the exclusion in Line 1C applies, joint debtors may complete a single statement. If the exclusion in Line 1C applies, each joint filer must complete a separate statement.

	Part I. MILITARY AND NON-CONSUMER DEBTORS
1A	<b>Disabled Veterans.</b> If you are a disabled veteran described in the Declaration in this Part IA, (1) check the box at the beginning of the Declaration, (2) check the box for "The presumption does not arise" at the top of this statement, and (3) complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.
	Declaration of Disabled Veteran. By checking this box, I declare under penalty of perjury that I am a disabled veteran (as defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 32 U.S.C. §901(1)).
1B	Non-consumer Debtors. If your debts are not primarily consumer debts, check the box below and complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.
	Declaration of non-consumer debts. By checking this box, I declare that my debts are not primarily consumer debts.
	Reservists and National Guard Members; active duty or homeland defense activity. Members of a reserve component of the
	Armed Forces and members of the National Guard who were called to active duty (as defined in 10 U.S.C. § 101(d)(1)) after
	September 11, 2001, for a period of at least 90 days, or who have performed homeland defense activity (as defined in 32 U.S.C. § 901(1))
	for a period of at least 90 days, are excluded from all forms of means testing during the time of active duty or homeland defense activity
	and for 540 days thereafter (the "exclusion period"). If you qualify for this temporary exclusion, (1) check the appropriate boxes and
	complete any required information in the Declaration of Reservists and National Guard Members below, (2) check the box for "The
	presumption is temporarily inapplicable" at the top of this statement, and (3) complete the verification in Part VIII.
	During your exclusion period you are not required to complete the balance of this form, but you must complete the form no later than 14 days after the date on which your exclusion period ends, unless the time for filing a motion raising the
	means test presumption expires in your case before your exclusion period ends.
1G	□ Declaration of Reservists and National Guard Members. By checking this box and making the appropriate entries below, I declare that I am eligible for a temporary exclusion from means testing because, as a member of a reserve component of the Armed Forces or the National Guard
	a. ☐ I was called to active duty after September 11, 2001, for a period of at least 90 days and ☐ I remain on active duty /or/
	☐ I was released from active duty on, which is less than 540 days before this bankruptcy case was filed;
	OR
	b. ☐ I am performing homeland defense activity for a period of at least 90 days /or/
	☐ I performed homeland defense activity for a period of at least 90 days, terminating on, which is less than 540 days before this bankruptcy case was filed.

		Part II. CALCULATION C	OF MONTHLY INCO	)ME I	FOR § 707(b)(7) EXCLU	SION			
	Marital/filing status. Check the box that applies and complete the balance of this part of this statement as directed.  a.  Unmarried. Complete only Column A ("Debtor's Income") for Lines 3-11.								
	b. Married, not filing jointly, with declaration of separate households. By checking this box, debtor declares under penalty of perjury: "My spouse and I are legally separated under applicable non-bankruptcy law or my spouse and I are living apart other than for the purpose of evading the requirements of § 707(b)(2)(A) of the Bankruptcy Code."  Complete only Column A ("Debtor's Income") for Lines 3-11.								
2	c. Married, not filing jointly, without the declaration of separate households set out in Line 2.b above.  Complete both  Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 3-11.								
	d. 🔀 N Lines 3	Married, filing jointly. Complete both Conditions 3-11.	olumn A ("Debtor's Incom	ne") an	d Column B ("Spouse's Income")	for			
	_	res must reflect average monthly income			•	Column A	Column B		
		prior to filing the bankruptcy case, ending the six months			=	Debtor's	Spouse's		
	result o	n the appropriate line.				Income	Income		
3	Gross	wages, salary, tips, bonuses, overtin	ne, commissions.			\$2,227.25	\$1,590.82		
		e from the operation of a business, presence in the appropriate column(s) of Li			Line b from Line a and enter				
	farm, er	nter aggregate numbers and provide det	ails on an attachment. Do no	ot enter	a number less than zero.				
4		Gross receipts	enses entered on Line b	<b>as a de</b> \$0.00	duction in Part V.	<del>,</del>			
	a. b.	Ordinary and necessary business expe	enses	\$0.00		<del> </del>			
	C.	Business income			act Line b from Line a	\$0.00	\$0.00		
	Rent a	ind other real property income.	Subtract Line b from Line a	and ent	er the difference	+			
	in the a	ppropriate column(s) of Line 5. Do not e	nter a number less than zer	o. <b>E</b>	Oo not include				
5	any pa	rt of the operating expenses entered Gross receipts	on Line b as a deduction	in Part \$0.00	:V.	ן ד			
IJ.	b.	Ordinary and necessary operating expe	enses	\$0.00		<del> </del>			
	C.	Rent and other real property income	511000		act Line b from Line a	\$0.00	\$0.00		
				<u> </u>		<del>-</del>			
6	Interes	t, dividends, and royalties.				\$0.00	\$0.00		
7	Pensio	n and retirement income.				\$0.00	\$0.00		
	_	nounts paid by another person or en	<u> </u>		<u>-</u>				
8		otor or the debtor's dependents, incluinclude alimony or separate maintenance							
	icomple	eted.				\$0.00	\$0.00		
9	Howeve was a b	bloyment compensation. Enter the r, if you contend that unemployment corponerit under the Social Security Act, do n A or B, but instead state the amount in	not list the amount of such	or your	spouse				
		ployment compensation claimed to penefit under the Social Security Act	Debtor <u>\$0.00</u>	Spous	se _\$0.00	\$0.00	\$0.00		
	Incom	e from all other sources. Specify	source and amount. If neces	<u>l</u> ssarv. li	st additional sources on a	<u> </u>			
	separat	e page. Do not include alimony or	separate maintenance pa	yments	s paid by your spouse				
10		mn B is completed, but include all ot include and or include any benefits received under the		•					
		crime against humanity, or as a victim of							
	a.				0				
	b.				0				
	Total	and enter on Line 10				\$0.00	\$0.00		
11		al of Current Monthly Income for § 70 n A, and, if Column B is completed, add				\$2,227.25	\$1,590.82		
		current Monthly Income for § 707(b)(7							
12		e 11, Column A to Line 11, Column B, a ted, enter the amount from Line 11, Colu		B has	not been	\$3,818.07			

	Part III. APPLICATION OF § 707(b)(7) EXCLUSION	
13	Annualized Current Monthly Income for § 707(b)(7). Multiply the amount from Line 12 by the number 12 and enter the result.	\$45,816.84
14	Applicable median family income. Enter the median family income for the applicable state and household size. (This information is available by family size at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)  a. Enter debtor's state of residence: <a href="CALIFORNIA">CALIFORNIA</a> b. Enter debtor's household size: <a href="#up&gt;4">4</a>	\$79,971.00
15	Application of Section 707(b)(7). Check the applicable box and proceed as directed.  The amount on Line 13 is less than or equal to the amount on Line 14. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete Part VIII; do not complete Parts IV, V, VI, or VII.  The amount on Line 13 is more than the amount on Line 14. Complete the remaining parts of this statement.	

#### Complete Parts IV, V, VI, and VII of this statement only if required. (See Line 15).

		Part IV. CALCULATION OF CURRENT MONTHLY INCOME FOR § 707(b	)(2)				
16	Enter	the amount from Line 12.		\$			
17	Marital adjustment. If you checked the box at Line 2.c, enter on Line 17 the total of any income listed in Line 11, Column B that was NOT paid on a regular basis for the household expenses of the debtor or the debtor's dependents. Specify in the lines below the basis for excluding the Column B income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If you did not check box at Line 2.c, enter zero.						
1.1	a.	\$					
	b.	\$					
	C.	\$					
	Total and enter on Line 17						
18	Curre	ent monthly income for § 707(b)(2). Subtract Line 17 from Line 16 and enter the result.		\$			

		Part V. CALCULATIO	N OF DE	DUCTIONS FROM INCOME		
		Subpart A: Deductions under S	tandard:	of the Internal Revenue Service	(IRS)	
19A	Star	ional Standards: food, clothing, and other items. Indards for Food, Clothing and Other Items for the app w.usdoj.gov/ust/ or from the clerk of the bankrupto	licable hous	n Line 19A the "Total" amount from IRS National ehold size. (This information is available at		\$
198	Heal Care of th and of ho total total	National Standards: health care. Enter in Line a1 below the amount from IRS National Standards for Out-of-Pocket Health Care for persons under 65 years of age, and in Line a2 the IRS National Standards for Out-of-Pocket Health Care for persons 65 years of age or older. (This information is available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) Enter in Line b1 the number of members of your household who are under 65 years of age, and enter in Line b2 the number of members of your household who are 65 years of age or older. (The total number of household members must be the same as the number stated in Line 14b.) Multiply Line a1 by Line b1 to obtain a total amount for household members under 65, and enter the result in Line c1. Multiply Line a2 by Line b2 to obtain a total amount for household members 65 and older, and enter the result in Line c2. Add Lines c1 and c2 to obtain a total health care amount, and enter the result in Line 19B.				
	Н	ousehold members under 65 years of age	Но	usehold members 65 years of age or older		
	a1.	Allowance per member	a2.	Allowance per member		
	b1.	Number of members	b2.	Number of members		
	c1.	Subtotal	c2.	Subtotal		\$
20A	IRS	cal Standards: housing and utilities; non-mortgag Housing and Utilities Standards; non-mortgage expe s information is available at www.usdoj.gov/ust/ or fro	nses for the	applicable county and household size.		\$

	Local Standards: housing and utilities; mortgage/rent expenses. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and household size (this information is available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter on						
20B	Line b the total of the Average Monthly Payments for any debts secured by your home, as stated in Line 42; subtract Line b from Line a and enter the result in Line 20B. <b>Do not enter an amount less than zero.</b>						
	a.	IRS Housing and Utilities Standards; mortgage/rental expense		\$	$\exists$ l		
	b.	Average Monthly Payment for any debts secured by your					
		home, if any, as stated in Line 42		\$	_		
	C.	Net mortgage/rental expense		Subtract Line b from Line a.	<b>-</b>    <sup>\$</sup>		
21	Lines Hous	I Standards: housing and utilities; adjustment. If you con 20A and 20B does not accurately compute the allowance to which you gand Utilities Standards, enter any additional amount to which you the basis for your contention in the space below:	ou are entitled				
					_\$		
	You a	I Standards: transportation; vehicle operation/public transporture entitled to an expense allowance in this category regardless of what ting a vehicle and regardless of whether you use public transportation	nether you pay				
22A	exper	k the number of vehicles for which you pay the operating expenses on ses are included as a contribution to your household expenses in Li $\square$ 1 $\square$ 2 or more.		operating			
		checked 0, enter on Line 22A the "Public Transportation" amount fr					
		checked 1 or 2 or more, enter on Line 22A the "Operating Costs" an					
		sportation for the applicable number of vehicles in the applicable Meton. (These amounts are available at www.usdoi.gov/ust/ or from the			\$		
	rtegie	www.usaoj.gowuse or norma		ariki apicy court.			
228	for a	I Standards: transportation; additional public transportation experience and also use public transportation, and you contend that you bublic transportation expenses, enter on Line 22B the "Public Transportation. (This amount is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or fron	are entitled to a cortation" amou	int from IRS Local Standards:	\$		
	of vel	I Standards: transportation ownership/lease expense; Vehicle nicles for which you claim an ownership/lease expense. (You may not see for more than two vehicles.)		ck the number ership/lease			
	□1	2 or more.					
	_						
23	(availa Monti	, in Line a below, the "Ownership Costs" for "One Car" from the IRS able at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy counly Payments for any debts secured by Vehicle 1, as stated in Line 4 and enter the result in Line 23.  Do not enter an amount less	ırt); enter in Lin 12; subtract Lin	e b the total of the Average			
	a.	IRS Transportation Standards, Ownership Costs	\$				
		Average Monthly Payment for any debts secured by Vehicle 1,	Ψ				
		as stated in Line 42	\$		\$		
	C.	Net ownership/lease expense for Vehicle 1	Subtract Line	b from Line a.			
	Local Standards: transportation ownership/lease expense; Vehicle 2.						
		plete this Line only if you checked the "2 or more" Box in Line 23.	<b>-</b>				
	Enter	, in Line a below, the "Ownership Costs" for "One Car" from the IRS		•			
	•	able at <u>www.usdoj.gov/ust/</u> or from the clerk of the bankruptcy col verage Monthly Payments for any debts secured by Vehicle 2, as sta	* *				
24		Line a and enter the result in Line 24. <b>Do not enter an amount le</b>					
47	a.	IRS Transportation Standards, Ownership Costs		\$	]		
	b.	Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42		\$			
	C.	Net ownership/lease expense for Vehicle 2		Subtract Line b from Line a.			
					]  \$		

25	for all f	ederal, state and local taxes, oth	· · · · · · · · · · · · · · · · · · ·		
26	Other Necessary Expenses: mandatory payroll deductions for employment. Enter the total average monthly payroll deductions that are required for your employment, such as retirement contributions, union dues, and uniform costs.  Do not include discretionary amounts, such as voluntary 401(k) contributions.				
				\$	
27	Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance.				
28	to pay	pursuant to the order of a court	or administrative agency, such as spousal or child support payments.	\$	
29	<b>challe</b> conditi	nged child. Enter the to on of employment and for educa	otal average monthly amount that you actually expend for education that is a stion that is required for a physically or mentally challenged dependent	\$	
30	for all federal, state and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes, social-security taxes, and Medicare taxes.  Other Necessary Expenses: mandatory payroll deductions for employment. Enter the total average monthly payroll deductions that are required for your employment, such as retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions.  Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for form life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance.  Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due support obligations included in Line 44.  Other Necessary Expenses: education for employment of for a physically or mentally challenged child. Enter the total average monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available.  Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on childcare - such as baby-sitting, day care, nursery and preschool.  Other Necessary Expenses: the advance of the such as a condition of the equal to a condition of employment and the such as a condition of employment and the such as a condition of employment and the such as a condition and the such as a condition and the such as a condition and the such as a baby-sitting, day care, nursery and preschool.  Other Necessary Expenses: the advance of the such as a condition of the payment and the such as a condition of the health and welfare of yourself		\$		
31	care th	at is required for the health and	welfare of yourself or your dependents, that is not reimbursed by insurance or		
	3 -	<del>-</del>		\$	
32	actuall pagers	y pay for telecommunication serv s, call waiting, caller id, special lo	vices other than your basic home telephone and cell phone service such as ong distance, or internet service to the extent necessary for your health		
	and we	elfare or that of your dependents	Do not include any amount previously deducted.	\$	
33	Total	Expenses Allowed under IRS	Standards. Enter the total of Lines 19 through 32	\$	
	1	Subp	art B: Additional Living Expense Deductions	-	
			<del>-</del>		
		ı Insurance, Disability Insuran	nce and Health Savings Account Expenses. List the monthly expenses in the		
	a.	Health Insurance	\$		
	b.	Disability Insurance			
<b></b>	<u> </u>	•			
34	<b> </b>		1.	\$	
			total amount. state your actual total average monthly expenditures in the	Ψ	
	3		,,		
	\$				
	Contir	nued contributions to the care	e of household or family members. Enter the total average actual		
35					
	elderly, chronically ill, or disabled member of your household or member of your immediate family who is				
	unable	•	ber of your household or member of your immediate family who is	\$	
	Protec	to pay for such expenses.	Enter the total average reasonably necessary monthly expenses that you actually	\$	
36	Protecting incurre	to pay for such expenses.  tion against family violence.  ed to maintain the safety of your	Enter the total average reasonably necessary monthly expenses that you actually family under the Family Violence Prevention and Services Act or	\$	
36	Protectincurre other a	to pay for such expenses.  ction against family violence.  d to maintain the safety of your population of the population	Enter the total average reasonably necessary monthly expenses that you actually family under the Family Violence Prevention and Services Act or e of these expenses is required to be kept confidential by the court.		
36	Protectincurre other a	to pay for such expenses.  ction against family violence.  d to maintain the safety of your to applicable federal law. The nature energy costs. Enter the tot Standards for Housing and Utilities.	Enter the total average reasonably necessary monthly expenses that you actually family under the Family Violence Prevention and Services Act or e of these expenses is required to be kept confidential by the court.		

Education expenses for dependent children less than 18. Enter the total average monthly expenses that you actually incur, not to exceed \$137.50 per child, for attendance at a private or public elementary or secondary school by your dependent children less than 18 years of age. You must provide your case trustee with documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in the IRS Standards.				\$	
clothin Standa or fron	Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary.				\$
	nued charitable contribu	itions. Enter the amount that you ents to a charitable organization as defined the second sec	u will continue to contribute ned in 26 U.S.C. § 170(c)(1		\$
Total	Additional Expense Ded	uctions under § 707(b). Enter the	total of Lines 34 through 40	0	\$
		Subpart C: Deductions	for Debt Payment	t	•
Future payments on secured claims. For each of your debts that is secured by an interest in property that you own, list the name of the creditor, identify the property securing the debt, state the Average Monthly Payment, and check whether the payment includes taxes or insurance. The Average Monthly Payment is the total of all amounts scheduled as contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total of the Average Monthly Payments on Line 42.					
	Name of Creditor	Property Securing the Debt	Average Monthly Payment	Does payment include taxes or insurance?	
a.			\$	☐ yes ☐no	
b.			\$	☐ yes ☐no	
c.			\$	☐ yes ☐no	
d.			\$	☐ yes ☐no	
e.			\$	☐ yes ☐no	
			Total: Add Lines a - e		\$
reside you m in add would	ay include in your deductio ition to the payments listed include any sums in defau	laims. If any of the debts listed in the property necessary for your support on 1/60th of any amount (the "cure amout in Line 42, in order to maintain posses of the that must be paid in order to avoid replaying chart. If necessary, list additionate property Securing the Debt	unt") that you must pay the osion of the property. The cupossession or foreclosure. L	ndents, creditor re amount ist and	
a.		+	\$		.
b.			\$		
c.			\$		
d.			\$		
e.			\$		
		+	Total: Add Lines a	- e	*  \$
Paym	ents on prepetition prior	rity claims. Enter the total amour	nt, divided by 60, of all priori	ity claims, such	
as prio	ority tax, child support and	alimony claims, for which you were liabl	e at the time of your bankru	•	
		tions, such as those set out in Line 2			

	the fo	<b>Ster 13 administrative expenses.</b> If you are eligible to file a case illowing chart, multiply the amount in line a by the amount in line b, and instrative expense.					
	a.	Projected average monthly Chapter 13 plan payment.	\$				
45	b.	Current multiplier for your district as determined under schedules issued by the Executive Office for United States Trustees. (This information is available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)	х				
	C.	Average monthly administrative expense of Chapter 13 case	Total: Multiply Lines a and b	\$			
46	Tota	Deductions for Debt Payment. Enter the total of Lines 42 through	ugh 45.	\$			
		Subpart D: Total Deduction	ons from Income				
47	Total	of all deductions allowed under § 707(b)(2). Enter the total	of Lines 33, 41, and 46.	\$			
		Part VI. DETERMINATION OF § 7	07(b)(2) PRESUMPTION				
48	Enter the amount from Line 18 (Current monthly income for § 707(b)(2))			\$			
49	Ente	r the amount from Line 47 (Total of all deductions allowed under	Subpart D: Total Deductions from Income allowed under § 707(b)(2). Enter the total of Lines 33, 41, and 46.  Part VI. DETERMINATION OF § 707(b)(2) PRESUMPTION Line 18 (Current monthly income for § 707(b)(2)) \$ Line 47 (Total of all deductions allowed under § 707(b)(2))  come under § 707(b)(2). Subtract Line 49 from Line 48 and enter the  succome under § 707(b)(2). Multiply the amount in Line 50 by the result.  sermination. Check the applicable box and proceed as directed.				
50	Mont result	···· <b>,</b> ································	from Line 48 and enter the	\$			
51							
	Initia	I presumption determination. Check the applicable box and pro	oceed as directed.				
52	☐ The amount on Line 51 is less than \$6,575 Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII. Do not complete the remainder of Part VI. ☐ The amount set forth on Line 51 is more than \$10,950. Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII. Do not complete the remainder of Part VI. ☐ The amount on Line 51 is at least \$6,575, but not more than \$10,950. Complete the remainder of Part VI. (Lines 53 through 55).						
53	Ente	r the amount of your total non-priority unsecured debt		\$			
54	Threshold debt payment amount. the result.  Multiply the amount in Line 53 by the number 0.25 and enter  \$						
	Seco	ndary presumption determination. Check the applicable box	and proceed as directed.				
55	☐ The amount on Line 51 is less than the amount on Line 54. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII. ☐ The amount on Line 51 is equal to or greater than the amount on Line 54. Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII.						
		PART VII. ADDITIONAL E	XPENSE CLAIMS				
	health	r Expenses. List and describe any monthly expenses, not otherwise n and welfare of you and your family and that you contend should be a	n additional deduction from your current				
		nly income under § 707(b)(2)(A)(ii)(I). If necessary, list additional sour average monthly expense for each item. Total the expenses.	ces on a separate page. All figures should reflect				
56		Expense Description	Monthly Amount				
	a.		\$				
	b.		\$				
	C.	Total: Add Lines a, b, and c	\$				
	<u> </u>	Total. / Idd Ellico u, b, dild o	<b>*</b>				

			Part VIII: VERIFICATION	
		lare under penalty of perjury that debtors must sign.)	at the information provided in this statement is true and correct. (If this a joint case,	
57	Date:	8/5/2009	Signature: /s/ PATRICK STEVEN DOW (Debtor)	
	Date:	8/5/2009	Signature: /s/ NICOL MARIE DOW  (Joint Debtor, if any)	

# UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF CALIFORNIA SACRAMENTO DIVISION

In r	PATRICK STEVEN DOW and NICOL MARIE DOW	Case No. Chapter 7	
	aka Nicol Marie Clarenbach		
	Allow out for Dolldon. TDTG. D. ADMITTD	/ Debtor	
	Attorney for Debtor: ERIC R. ORTNER		
	STATEMENT PURSUANT TO RU	JLE 2016(B)	
The	undersigned, pursuant to Rule 2016(b), Bankruptcy Rules, states that:		
1.	The undersigned is the attorney for the debtor(s) in this case.		
2.	The compensation paid or agreed to be paid by the debtor(s), to the une	-	
	a) For legal services rendered or to be rendered in contemplation of a connection with this case		2 500.00
	b) Prior to the filing of this statement, debtor(s) have paid	\$	0.00
	c) The unpaid balance due and payable is	\$	2,500.00
3.	\$of the filing fee in this case has been paid.		
4.	<ul> <li>The Services rendered or to be rendered include the following:</li> <li>a) Analysis of the financial situation, and rendering advice and assista file a petition under title 11 of the United States Code.</li> <li>b) Preparation and filing of the petition, schedules, statement of financial court.</li> </ul>		-
	c) Representation of the debtor(s) at the meeting of creditors.		
5.	The source of payments made by the debtor(s) to the undersigned was services performed, and  None other	s from earnings, wages and	d compensation for
6.	The source of payments to be made by the debtor(s) to the undersigned be from earnings, wages and compensation for services performed, and None other	•	maining, if any, will

7. The undersigned has received no transfer, assignment or pledge of property from debtor(s) except the following for

None

the value stated:

8. The undersigned has not shared or agreed to share with any other entity, other than with members of undersigned's law firm, any compensation paid or to be paid except as follows:

None

Dated: 8/5/2009 Respectfully submitted,

X/s/ ERIC R. ORTNER

Attorney for Petitioner: ERIC R. ORTNER

ERIC R. ORTNER

2053 Forest Avenue, Suite 7

Chico CA 95928

530-891-6128

info@ortnerlawoffice.com

#### UNITED STATES BANKRUPTCY COURT

## NOTICE TO CONSUMER DEBTOR(S) UNDER §342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

#### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

#### 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

#### Chapter 7: Liquidation (\$245 filing fee, \$39 administrative fee, \$15 trustee surcharge: Total fee \$299)

- 1. Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.
- 2. Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.
- 3. The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.
- 4. Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

B 201 Page 2

### <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$39 administrative fee: Total fee \$274)

- 1. Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.
- 2. Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.
- 3. After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

#### **Chapter 11:** Reorganization (\$1000 filing fee, \$39 administrative fee: Total fee \$1039)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

#### **Chapter 12:** Family Farmer or Fisherman (\$200 filing fee, \$39 administrative fee: Total fee \$239)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

#### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

#### **Certificate of Attorney**

I hereby certify that I delivered to the debtor this notice required by § 342(b) of the Bankruptcy Code.

PATRICK STEVEN DOW and NICOL MARIE DOW

Printed Name(s) of Debtor(s)

Case No. (if known) \_\_\_\_

X_/s/ ERIC R. ORTNER		8/5/2009	
ERIC R. ORTNER ERIC R. ORTNER	Bar #: 098183	Date	
2053 Forest Avenue, Suite 7 Chico, CA 95928	7		
530-891-6128 Fax: info@ortnerlawoffice.com	530-891-6206		
I (We) the debtor(s	Certificate of the control of the co	of the Debtor	

 $_{
m X}$  /s/ PATRICK STEVEN DOV

 $\chi$  /s/ NICOL MARIE DOW

Signature of Joint Debtor (if any)

Signature of Debtor

8/5/2009

Date

8/5/2009

Date